

JAN/25/2016 MON 03:25

No.

P. 001

**L16000001435/**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H16000018542 3)))



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Division of Corporations  
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SECRETARY OF STATE  
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16 JAN 25 PM 1:09

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
LEAL RENT A CAR LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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JAN/25/2016/MON 03:45 PM

FAX No.

P.002

850-617-6381

1/25/2016 2:36:19 PM PAGE 1/001 Fax Server



January 25, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: LEAL RENT A CAR LLC  
REF: W16000005015

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Correct the spelling in the REGISTERED AGENT's name - COPPRORATE.,

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H16000018542  
Letter Number: 916A00001574

JAN/25/2016/MON 03:46 PM

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16 JAN 25 PM 1:00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LEAL RENT A CAR LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

7121 NW 6 AVE  
MIAMI, FL 33150

Mailing Address:

1000 PONCE DE LEON BLVD  
SUITE: 105  
CORAL GABLES, FL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

EXPRESS CORPORATE FILING SERVICE, INC.

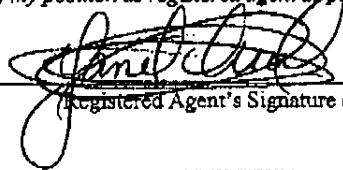
Name

1000 PONCE DE LEON BLVD STE: 105

Florida street address (P.O. Box **NOT** acceptable)

<u>CORAL GABLES</u>	<u>FL</u>	<u>33134</u>
City	State	Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.*



(Registered Agent's Signature (REQUIRED))

(CONTINUED)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability

SECRETARY OF STATE  
FLORIDA

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

ANTHONY CORUJO

7121 NW 6 AVE

MIAMI, FL 33150

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ANTHONY CORUJO

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)